Rec'd PCT/PTS 0.9 SEP 2004 Attorney Docket No.

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that

the specification of which: (check one)

10/50/144

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD AND ARRANGEMENT FOR TRANSLATING DATA

REGULAR OR DESIGN APPLICATION						
☐ is	attached hereto.					
	was filed on as application Serial No					
		(if		•		
PCT FILED APPLICATION ENTERING NATIONAL STAGE						
⊠ w a	was described and claimed in International application No. PCT/FI2003/000195 filed on 14 March 2003 and as amended on (if any) .					
I hereby st claims, as a	ate that I have reviev amended by any amer	ved and understand the conditional referred to above.	tents of the above-identified spe	ecification, including the		
l acknowled	dge the duty to disclos	e information which is mater	ial to patentability as defined in T	itle 37, Code of Federal		
Regulations, §1.56. PRIORITY CLAIM						
I hereby claim foreign priority benefits under 35 USC 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.						
PRIOR FOREIGN APPLICATION(S)						
	Country	Application	Date of Filing	Priority		
		Number	(day, month, year)	Claimed		
	Finland	20020532	20 March 2002	Yes		
<u></u>]			
tion(s) listed	im the benefit under T d below:	itle 35, United States Code §	119(e) of any United States prov	risional patent applica-		
Application	No.	Filing Date	Status (patented, p	ending abandoned)		
(Complete t	his part only if this is a	a continuing application.)				
provided by patentability	of each of the claims of the first paragraph of as defined in Title 37	of this application is not disclor of 35 USC 112. I acknowled	tates application(s) listed below a osed in the prior United States ap ge the duty to disclose informat is §1.56 which became available ing date of this application:	oplication in the manner ion which is material to		
Application	No.	Filing Date	Status (patented, p	ending abandoned)		

POWER OF ATTORNEY

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from <u>Berggren Oy Ab</u> as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the registered patent attorneys represented by Customer No. 00466 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, including: Robert J. PATCH, Reg. No. 17,355, Andrew J. PATCH, Reg. No. 32,925, Robert F. HARGEST, Reg. No. 25,590, Benoît CASTEL, Reg. No. 35,041, Thomas W. PERKINS, Reg. No. 33,027, Roland E. LONG, Jr., Reg. No. 41,949, Eric JENSEN, Reg. No. 37,855, Liam MCDOWELL, Reg. No. 44,231, and Philip A. DUBOIS, Reg. No. 50,696,

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Address all telephone calls to Young & Thompson at 703/521-2297. Telefax: 703/685-0573.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventor's signature:	Date:				
Residence:	Citizenship:				
Post Office Address:					
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